

Cairns School of Distance Education

CRICOS Registration Number 00608A Address: Hoare Street, Manunda, Cairns PO Box 7092, Cairns Qld 4870

Telephone: 07 4080 9111 Facsimile: 07 4080 9100

Email:schoolbasedenrolments@cairnssde.eq.edu.ad

Website: http://www.cairnssde.eq.edu.au

Enrolment Form - School Based Subject Enrolment - Class Groups - 2024

Please ensure all sections of the form are fully completed to avoid enrolment delays. Forms with information missing will be returned to the base school for completion. For the purposes of this enrolment Cairns SDE is the 'host' school and the 'base' school is the school that is applying to enrol a student at Cairns SDE.

| Student Informatio | n | | |
|--------------------|-------|---------------|------------|
| Student Name | EQ ID | Date of birth | Year level |
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This page may be substituted with a OneSchool report containing similar fields.



| School name | | | | | | | School numbe | r | |
|---|------|---------------|-------------------|----------|----------------------|--------------------|--------------|-----------|--|
| Postal address | | | | | | Postcode | | | |
| Phone | | Fa | ах | | School email address | | | | |
| Study Information Subject requested NB. Subject requested cannot be additional to the number generally studied at the base school. In selecting a subject you confirm you possess the stipulated prerequisite to study this subject as specified in the course outlines. For subject prerequisites, please refer to the 2024 Course Outlines available on the Cairns SDE website. | | | | | | | | | |
| Subject | | | | | | | Y | ear level | |
| | | | | | | | | | |
| Reason for requested enrolment – mandatory (Please tick as appropriate) | | | | | | | | | |
| Subject NOT OFFERED by base school | | | | | | | | | |
| | | | | | | | | | |
| Base School Supervisor/School Contact | | | | | | | | | |
| Please note: This person will be the contact point for the Cairns SDE subject teacher | | | | | | | | | |
| Title | | | | | | | | | |
| Surnam | е | | | | Given name | | | | |
| Position | | | | | Email | | | | |
| Phone | hone | | Fax | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Only complete in the case of Multiple Class enrolments | | CSDE USE ONLY | | | | | | | |
| Base School Classroom Teacher | | | nool Class ode | CSDE Tea | cher | CSDE Class Code | | | |
| e.g. Ms. Jane Smith | | | 5C | | | | | | |
| | | | | | | | | | |

Base School Details



Privacy Statement

The Department of Education is collecting the information on this form for the purposes outlined in the Education (General Provisions) Act 2006 (EGPA 2006), and in particular for:

- i. assessing whether your application for enrolment should be approved
- ii. meeting reporting obligations required by law or under Commonwealth State funding arrangements
- iii. administering and planning for providing appropriate education, training and support services to students
- iv. assisting departmental staff to maintain the good order and management of schools, and to fulfil their duty of care to all students and staff
- v. communicating with students and parents

This collection is authorised by ss. 155 and 428 of the EGPA 2006. DETE will disclose personal information from this form to the Queensland Studies Authority when opening student accounts, in compliance with Part 2A of the Education

(Queensland Studies Authority) Act 2002 (Qld). Personal Information from this form will also be supplied to Centrelink in compliance with ss.194 and 195 of the Social Security (Administration) Act 1999 (Cth). De-identified information concerning parents' school and non-school education, occupation group and main language other than English and students' country of birth, main language other than English, sex and Indigenous status, is supplied to the Commonwealth Department of Education, Employment and Workplace Relations in compliance with Commonwealth – State funding agreements.

Personal information collected on this form may also be disclosed to third parties where authorised or required by law. Your information will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please contact your child's school in the first instance. If you have a concern or complaint about the way your personal information has been collected, used, stored or disclosed, please also contact your child's school in the first instance.

Principal's Declaration

- I certify that the details in this Application for Enrolment are correct and reflect details in our school records.
- Our school agrees to co-operate fully with Cairns School of Distance Education staff in all matters relating to the assessment/progress of enrolled students.
- Loss of learning materials or materials returned in an unacceptable state will incur a replacement cost.
 The base school agrees to accept full responsibility for the payment of any replacement costs.
- Cairns SDE Semester Reports will be received and distributed to students.

All school based students will have access to:

- computer access at school (PC or Mac)
- internet access at school
- individual student headset with microphone for VOIP
- access to a telephone

| Principal name | | |
|---------------------|----|-----|
| Principal signature | Da | ate |

Address and Forward to:

Attention:School Based Enrolments Cairns School of Distance Education PO Box 7092 Cairns QLD 4870 Fax: (07) 4080 9100

Email: schoolbasedenrolments@cairnssde.eq.edu.au

Have you enclosed?

- Bell Times
- School timetable 2024

Cairns SDE office use only

| Call its SDE office use only | | | | | | |
|------------------------------|--------------------------|--|--|------------|--|--|
| Date received | Roll class | | DP | | | |
| Year level | Subject class | | EO | | | |
| Level of service | Mailroom/teacher advised | | | | | |
| FTE | Invoice date | | | | | |
| Contact Teacher | | | A STATE OF THE PARTY OF THE PAR | Queensland | | |

Government

^{*}please ensure all required signatures are provided